

PTO/SB/21 (09-08)

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**TRANSMITTAL  
FORM**

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/644,179	RECEIVED CENTRAL FAX CENTER
	Filing Date	August 20, 2003	SEP 24 2007
	First Named Inventor	David T. Ross	
	Art Unit	3637	
	Examiner Name	Tran, Hanh Van	
Total Number of Pages in This Submission	10	Attorney Docket Number	25493-457390

**ENCLOSURES**      *(Check all that apply)*

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
<b>Remarks</b>		
In the event any further fees are necessary to be paid, the Commissioner is authorized to debit Deposit Account No. 19-1351.		

### Remarks

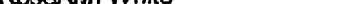
In the event any further fees are necessary to be paid, the Commissioner is authorized to debit Deposit Account No. 19-1351.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	27717
Signature	
Printed name	Joseph H. Herron
Date	September 24, 2007
	Reg. No. 53,019

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Signature	
Typed or printed name	RoseAnn White

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PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/644,179	)	CUSTOMER NO. 27717
Applicant: David T. Ross	)	
Filed: August 20, 2003	)	Confirmation No.: 5706
Docket No.: 25493-457390	)	Examiner: Tran, Hanh Van
Date: September 24, 2007	)	TC/A.U.: 3637
Title: DRAWER FRONTS	)	
	)	

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Director for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## AMENDMENT

Dear Sir:

In response to the Office Action of July 27, 2007, please amend the above-captioned application as set forth below.

Amendments to the Claims includes amendments to Claims 11, 16 and 21, as set forth in the Listing of Claims, beginning on page 2 of this paper.

Remarks begin on page 7 of this paper.

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RoseAnn White